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Bib Data Sheet

CONFIRMATION NO. 6869

SERIAL NUMBER 10/083,979	FILING DATE 02/27/2002 RULE	CLASS 607	GROUP ART UNIT 3739	ATTORNEY DOCKET NO. 01-248	
APPLICANTS Dexter Lee Porterfield, Valdosta, GA; ** CONTINUING DATA ***** ** FOREIGN APPLICATIONS ***** IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 03/22/2002					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		STATE OR COUNTRY GA	SHEETS DRAWING 6	TOTAL CLAIMS 11	INDEPENDENT CLAIMS 2
ADDRESS Brian D. Bellamy P.O. Box 1997 Thomasville, GA 31799-1997					
TITLE Therapeutic support pad					
FILING FEE RECEIVED 370	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		